PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUL LE Commissioner for Patents P.O. Box 1450
Alexandra 2005

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correct maintenance fee notificated in the correct maintenance fee no	correspondence includir ed below or directed oth tions.	ng the Patent, adva nerwise in Block 1	nce of the contract of the con	rders and notification of a) specifying a new con	of m rresp	naintenance fees wi condence address;	ll be m and/or (ailed to the current b) indicating a sepa	correspondence ad rate "FEE ADDRE	dress as SS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
FITZPATRICK CELLA HARPER & SCINTO 30 ROCKEFELLER PLAZA NEW YORK, NY 10112						Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
									(Deposito	r's name)	
									(S	ignature)	
				L						(Date)	
APPLICATION NO.	FILING DATE			FIRST NAMED INVENT	OR		ATTOR	NEY DOCKET NO.	CONFIRMATION	NO.	
10/647,273 TITLE OF INVENT COMPUTER-READAB	08/26/2003 FION: INFORMATIO LE MEMORY MEDIUI		G AI	Hideki Honda PPARATUS, JOB I	PRO	CESSING MET		500.017509. AND PROGRAM	2634 , AND		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DU	ΙE	PUBLICATION FEE DU	JE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUI		
nonprovisional	NO	\$1440		\$300		\$0		\$1740	09/16/200	8	
EXAMINER		ART UNIT		CLASS-SUBCLASS							
POPOVICI, DOV		2625		358-001140							
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON 				(1) the names of up or agents OR, altern (2) the name of a si registered attorney 2 registered patent a listed, no name will	the names of up to 3 registered patent attorneys agents OR, alternatively, the name of a single firm (having as a member a istered attorney or agent) and the names of up to agistered patent attorneys or agents. If no name is ed, no name will be printed. ATENIT (cript or turn)						
PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI	less an assignee is ident th in 37 CFR 3.11. Comp GNEE	ified below, no assoletion of this form		data will appear on the T a substitute for filing (B) RESIDENCE: (Cl	e pa an a	tent. If an assigne assignment. and STATE OR CO			cument has been t	iled for	
Canon Kabushiki Kaisha Tokyo, Japan											
Please check the appropr	riate assignee category or	categories (will no	ot be pi	rinted on the patent):		Individual 💢 Cor	poration	n or other private gro	up entity Gove	rnment	
4a. The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies5				b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 08-1205 (enclose an extra copy of this form).							
,	tus (from status indicate		7	☐ b. Applicant is no	1000	on eleimine SMAI	I ENITE	TV status See 27 CE	P 1 27(~\(2)		
	ns SMALL ENTITY statu and Publication Fee (if req records of the United Sta			* *	_					party in	
Authorized Signature	/Frank C	ire #42,4	119,	<u>/</u>		Date Ju	Ly 3	1, 2008			
Typed or printed nam	ne Frank L	. Cire				Registration No	o. <u>4</u>	2,419			
an application. Confider submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	nation is required by 37 C atiality is governed by 35 d application form to the ions for reducing this bu Virginia 22313-1450. DC 313-1450. Eduction Act of 1995, no	U.S.C. 122 and 33 be USPTO. Time wirden, should be ser O NOT SEND FEE	7 CFR ill vary nt to the S OR	1.14. This collection is depending upon the ine Chief Information Of COMPLETED FORMS	esti divi fice TO	mated to take 12 m dual case. Any configuration, U.S. Patent and TO THIS ADDRESS.	inutes t nments radema SEND	o complete, including on the amount of ting rk Office, U.S. Depa TO: Commissioner f	g gathering, preparting you require to continue to continue to continue to Commer or Patents, P.O. Bo	ng, and omplete ce, P.O. ox 1450,	